PAGE 1 / 6 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Friends of Dick Durbin Committee PO Box 1949 ADDRESS (number and street) (Check if address is changed) Springfield 62705 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS fec@capcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.dickdurbin.com (Check if address is changed) DATE 2022 C00148999 FEC IDENTIFICATION NUMBER 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Nissen, Melissa, , , Type or Print Name of Treasurer Nissen, Melissa, , , [Electronically Filed] 09 13 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. **FEC FORM 1**

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530 Local 202-694-1100
,			LUCAI 202-034-1100

E	C Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the car information below.)	ndidate
	Name of Candidate Durbin, Richard, Joseph,	<u> </u>
	Party Affiliation DEM Sought: House Senate President	State IL istrict
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican, etc.)	Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	anization is a:
	Corporation Corporation w/o Capital Stock Labor Organi	zation
	Membership Organization Trade Association Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fun committee. (i.e., nonconnected committee)	d or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mo committees/organizations, at least one of which is an authorized committee of a federal candidate.	re political
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mocommittees/organizations, none of which is an authorized committee of a federal candidate.	re political
	Committees Participating in Joint Fundraiser	
	1	

	EEO Farms 4 (Davidson 4 O	0/2000)		Do 9
- \/	FEC Form 1 (Revised 0 Write or Type Committee Name	2/2009)		Page 3
V	• •	Durbin Committee		
6.		ganization, Affiliated Committee, Joint Fundraising Rep	presentative. or Leaders	hip PAC Sponsor
	Durbin Victory Fund	3	······································	
	Mailing Address	600 Pennsylvania Ave SE		
		#15180		
		Washington	DC 20003	
		CITY A	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraisin	ng Representative	_eadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position	of the person in possessi	on of committee
	Nissen, Me	issa, , ,		
	Full Name			
	Mailing Address	600 Pennsylvania Ave SE		
		# 15180		
		Washington	DC 20003	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Treasurer		umbor 202 -	544 _ 6960
		Telephone nu	imbei	
8.	Treasurer: List the name and	d address (phone number optional) of the treasurer of the	ne committee and the na	me and address of
0.	any designated agent (e.g., a		ie committee, and the na	me and address of
	Full Name Nissen, Me	issa,,,		
	of Treasurer			
	Mailing Address	600 Pennsylvania Ave SE		
		#15180		
		Washington	DC 20003	
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼	5 2	511.1E —	
	Treasurer		202	544 6960

Telephone number

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Title or Decition	CITY ▲ STATE ▲	ZIP CODE ▲
Title or Position ■	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds, ho kes or maintains funds.	lds accounts, rents
Name of Bank, D	epository, etc.	
Mailing Address	Bank of Springfield	
Mailing Address	Springfield IL 62711 CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.	
	Amalgamated Bank	
Mailing Address	1825 K St NW	
	Washington DC 20006	
	CITY ▲ STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ____

(h). Joint Fundraisi	ig i artiolpariti		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
Mailing Address	600 Pennsylvania Ave SE		1 1 1 1 1 1 1 1 1
	#15180		<u> </u>
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represente	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represente	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
resignated Agent: Identife Full Name Mailing Address	y by name, address (phone number – optional) CITY		
Full Name Mailing Address	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Janks or Other Deposite afety deposit boxes or make the property of the proposition of Bank, depository, etc.	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ____

(h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected Durbin Budzinski	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	600 Pennsylvania Ave SE		
	#15180		
	Washington	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joby by name, address (phone number – optional)	oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	oint Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or make of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or make of Bank, epository, etc.	cy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A